

Important: Follow the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION						FOR INSURANCE COMPANY USE	
A1. Building Owner's Name BRIAN R. CASTLE REVOCABLETRUST & CHERYLL A. CASTLE REVOCABLE TRUST						Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6 GENTIAN ROAD						Company NAIC Number:	
City HAMPTON		State New Hampshire		ZIP Code 03842			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX MAP 168 LOT 54, ROCKINGHAM COUNTY REGISTRY OF DEEDS BOOK 4453 PAGE 1379							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)						RESIDENTIAL	
A5. Latitude/Longitude: Lat. 42.93957°N Long. 70.79759°W						Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.							
A7. Building Diagram Number 8							
A8. For a building with a crawlspace or enclosure(s):							
a) Square footage of crawlspace or enclosure(s) 1296.00 sq ft							
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0							
c) Total net area of flood openings in A8.b 0.00 sq in							
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No							
A9. For a building with an attached garage:							
a) Square footage of attached garage N/A sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade							
c) Total net area of flood openings in A9.b sq in							
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number TOWN OF HAMPTON 330132				B2. County Name ROCKINGHAM		B3. State New Hampshire	
B4. Map/Panel Number 33015CO433	B5. Suffix E	B6. FIRM Index Date 05-17-2005	B7. FIRM Panel Effective/ Revised Date 05-17-2005	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: <input type="checkbox"/> CBRS <input type="checkbox"/> OPA							

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6 GENTIAN ROAD			Policy Number:
City HAMPTON	State Nevada	ZIP Code 03842	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: SCS TBM 28 Vertical Datum: NGVD

Indicate elevation datum used for the elevations in items a) through h) below.

☒ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.


Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>6.40</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>9.10</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>6.70</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.40</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.00</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>6.40</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☐ No ☐ Check here if attachments.

Certifier's Name ANNE W. BIALOBRZESKI		License Number NHLLS 752	
Title LAND SURVEYOR			
Company Name STOCKTON SERVICES			
Address PO BOX 1306			
City HAMPTON	State New Hampshire	ZIP Code 03843-1306	
Signature <i>Anne W. Bialobrzewski</i>	Date 09-17-2018	Telephone (603) 929-7404	Ext.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)
FURNACE AND HOT WATER HEATER ARE AT NEXT HIGHER FLOOR (EL 9.1)
EXTERIOR HEAT PUMP IS ELEVATED (EL 7.7)
SMALL MODINE HEATER SUSPENDED IN CRAWL SPACE (EL 6.7)
CRAWL SPACE IS ENCLOSED BY VINYL SKIRTING
PAGES 3 AND 4 OF THIS FORM HAVE NO DATA AND ARE THEREFORE NOT INCLUDED IN THIS CERTIFICATE.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE**IMPORTANT: In these spaces, copy the corresponding information from Section A.****FOR INSURANCE COMPANY USE**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
6 GENTIAN ROAD

Policy Number:

City
HAMPTONState
New HampshireZIP Code
03842

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption FRONT VIEW 09/13/2018

Clear Photo One



Photo Two

Photo Two Caption RIGHT SIDE VIEW 09/13/2018

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
6 GENTIAN ROAD

Policy Number:

City
HAMPTON

State
New Hampshire

ZIP Code
03842

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption FRONT AND LEFT SIDE VIEW 09/13/2018

Clear Photo Three



Photo Four

Photo Four Caption REAR AND RIGHT SIDE VIEW 09/13/2018

Clear Photo Four

Policy Number / Name

Underwriting Information

Save

Delete

Copy

Back

Next

Quote Number	28QT4614096399	Agency Number	731371
Insured Name	SOLOMON SIDELL	Agency	BROWNELL INSURANCE CENTER INC
Property Address	6 GENTIAN RD HAMPTON, NH 03842-4256	Agency Address	5 NASHUA RD LONDONDERRY, NH 03038

Building Information**Building Purpose**Residential ☐**Building Occupancy**Single Family ☐**Is the Insured a Small Business with less than 100 Employees?**☐ Yes ☒ No**Building Description**Main House ☐**Building Under Construction**☐ Yes ☒ No**Walled & Roofed**☒ Yes ☐ No**Building partially or entirely over water**Not Over Water ☐

The NFIP insures additions and extensions attached to and in contact with the building by means of a rigid wall, a solid load-bearing interior wall, a stairway, an elevated walkway, or a roof. At the insured's option, additions and extensions connected by any of these methods may be separately insured.

Additions and extensions attached to and in contact with the building by means of a common interior wall that is not a solid load-bearing wall are always considered part of the building and cannot be separately insured.

Include Coverage for Additions or ExtensionsNone ☐

Effective April 1, 2015, a \$250 surcharge will be applied to the total premium charged for non-primary residence and a \$25 surcharge for primary residence status. Additionally, policies rated with non-primary pre-FIRM subsidized rates will reflect a rate increase. As part of the current flood reform laws, the NFIP now requires verification of primary residence status through documentation. For more information, including a list of acceptable documents, please see the NFIP Important Notice to Residential Policyholders. (<https://www.wrightflood.net/static/corp/documents/FINR> and Statement of Prim Res Status.pdf)

What percentage of the year following the policy effective date will the insured and/or the insured's spouse live in the building?☒ 50% or Less ☐ Between 51-79% ☐ 80% or more

Is Building Located on Leased Federal Property? ☐ Yes ☒ No

Is coverage for the entire building? ☒ Yes ☐ No

State Owned ☐ Yes ☒ No

Square Footage (optional)

Used for other products

Rating Information

Elevation Certificate (EC) ☒ Yes ☐ No

Would you like to obtain a premium estimate by providing partial underwriting information or would you like to provide expanded rating details including garage information and elevation certificate data?

Premium Estimate Type ☒ Quote ☐ Indication

Elevation Certificate Information

Elevation Certificate (EC) Date (mm/dd/yyyy)

(Section D or F of EC)

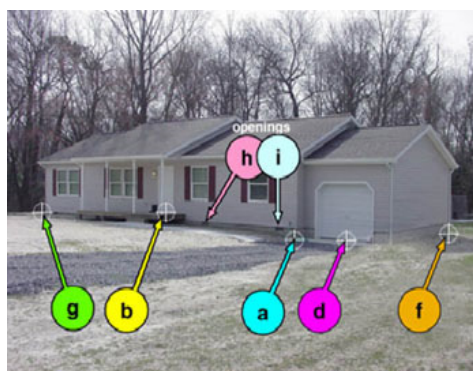
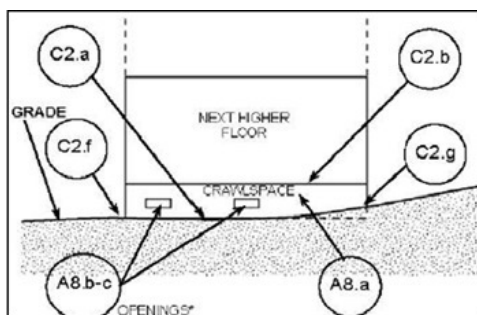
Diagram Number

(Section A, A7 or Section C of EC)

Diagram 8

All buildings elevated on a crawlspace with the floor of the crawlspace at or above grade on at least one side, with or without attached garage.

Distinguishing Feature: For all zones, the area below the elevated floor is enclosed by solid or partial perimeter walls. In A zones, the crawlspace is with or without openings* present in the walls of the crawlspace.




*An "opening" is defined as a permanent opening in a wall that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawlspaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the higher of the exterior or interior grade (adjacent) or floor immediately below the openings.

Base Flood Elevation (Section B, B9 or Section B6 of EC)	<input type="text" value="9.0"/>
Elevation Datum (Section C, C2 of EC)	NGVD 1929 <input type="button" value="v"/>
Top of Bottom Floor (including basement, enclosure or crawlspace) Section C, C2.a or C3.a of EC	<input type="text" value="6.4"/>
Top of Next Higher Floor (Section C, C2.b or C3.b of EC)	<input type="text" value="9.1"/>
Attached garage (top of slab) (Section C, C2.d or C3.d of EC)	<input type="text"/>
Lowest Elevation of Machinery or Equipment Servicing the Building (Section C2.e or C3.e of EC)	<input type="text" value="6.7"/>
Lowest Adjacent Grade (Section C, C2.f or C3.f of EC)	<input type="text" value="6.4"/>

Compliant photographs meet the following criteria: The photographs reveal all four sides of the risk, the number of floors and the foundation design, and the photographs are taken within 90 days of the date of submission.

Recent, compliant photographs are required. Please provide the date the photographs of the risk were taken

 (mm/dd/yyyy)

Garage Information

Garage attached to or part of the building ☐ Yes ☒ No

Building Foundation / Design Information

Basement / Enclosure / Crawlspace	<input type="button" value="Crawlspace"/> <input type="button" value="v"/>
Partially or Fully Enclosed	Fully <input type="button" value="v"/>
Enclosure or Crawlspace Square Footage	<input type="text" value="1296"/> square feet

(If elevator(s) present, include the square footage of all elevator shafts in the Enclosure or Crawlspace Square Footage.)

Enclosure or Crawlspace Used For	Access <input type="button" value="v"/>
Foundation Type	Piles <input type="button" value="v"/>
Design of Enclosure or Crawlspace Walls	Other - <input type="button" value="v"/>
Number of Permanent Openings in the enclosure / crawlspace walls within 1.0'	<input type="text" value="0"/>

above adjacent grade
(Section A, A8.b of EC)

**Total net area of all Permanent
Openings in the enclosed
area/crawlspace walls within 1.0' above
adjacent grade**
(Section A, A8.c or Section C, C3.i of EC)

square inches

**Engineered Flood Openings in Enclosure
or Crawlspace Walls (Section A, A8.d of
EC)** ☐ Yes ☒ No

**Machinery or Equipment in
Basement/Enclosure or Crawlspace** ☐ Yes ☒ No

**Does the basement or enclosure contain
a washer, dryer or food freezer?** ☐ Yes ☒ No

Elevator(s) servicing the building? ☐ Yes ☐ No

Number of floors or Building Type
(Provide the number of floors in the
entire building, including
basement/enclosed area, if applicable)

Coverage Information

For Replacement Cost: If building only coverage or building and contents coverage, provide the replacement cost of only the building (including the cost of the building foundation). If contents only coverage, provide the actual cash value of the contents.

Replacement Cost

Total Building Coverage Maximum Building Coverage: \$250,000

Total Contents Coverage Maximum Contents Coverage: \$100,000

Contents Information

Contents Location

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Questions or Comments? Click the Contact Us link above.

6 GENTIAN RD

Location 6 GENTIAN RD**Mblu** 168/ 54/ / /**Acct#** 3706**Owner** CASTLE, BRIAN R REVOC TRUST**Assessment** \$339,900**Appraisal** \$339,900**PID** 3706**Building Count** 1

Current Value

Appraisal			
Valuation Year	Improvements	Land	Total
2017	\$128,200	\$211,700	\$339,900
Assessment			
Valuation Year	Improvements	Land	Total
2017	\$128,200	\$211,700	\$339,900

Owner of Record

Owner CASTLE, BRIAN R REVOC TRUST
Co-Owner CASTLE, CHERYLL A REVOC TRUST
Address PO BOX 1653
HAMPTON, NH 03843

Sale Price \$40
Certificate
Book & Page 4453/1379
Sale Date 03/22/2005
Instrument 1A

Ownership History

Ownership History					
Owner	Sale Price	Certificate	Book & Page	Instrument	Sale Date
CASTLE, BRIAN R REVOC TRUST	\$40		4453/1379	1A	03/22/2005
CASTLE, BRIAN R/CHERYLL A	\$250,000		3683/1046	00	12/03/2001
BRUNETTE, THERESA LYNN/FRANK D	\$153,000		3238/1501	00	09/17/1997
MOLONEY, JOHN F/MARY T	\$0		1843/0365	00	11/15/1966

Building Information

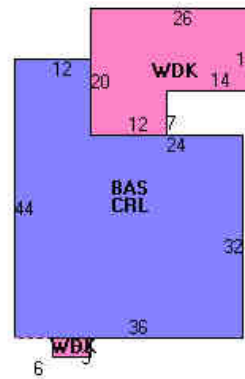
Building 1 : Section 1

Year Built: 1961
Living Area: 1,296
Replacement Cost: \$147,069
Building Percent Good: 84
Replacement Cost Less Depreciation: \$123,500

Building Attributes	
Field	Description
Style	Ranch
Model	Residential
Grade:	Average
Stories:	1 Story
Occupancy	1
Exterior Wall 1	Vinyl Siding
Exterior Wall 2	
Roof Structure:	Gable/Hip
Roof Cover	Asph/F Gls/Cmp
Interior Wall 1	Drywall/Sheet
Interior Wall 2	
Interior Flr 1	Carpet
Interior Flr 2	
Heat Fuel	Gas
Heat Type:	Hot Water
AC Type:	Heat Pump
Total Bedrooms:	2 Bedrooms
Total Bthrms:	2
Total Half Baths:	0
Total Xtra Fixtrs:	
Total Rooms:	5 Rooms
Bath Style:	Modern
Kitchen Style:	Stone-M cab.
MHP	

Building Photo

(<http://images.vgsi.com/photos2/HamptonNHPhotos//\00\00\97\22.jpg>)

Building Layout

(http://images.vgsi.com/photos2/HamptonNHPhotos//Sketches/3706_3716.jpg)

Building Sub-Areas (sq ft)			Legend
Code	Description	Gross Area	Living Area
BAS	First Floor	1,296	1,296
CRL	Crawl Space	1,296	0
WDK	Deck, Wood	440	0
		3,032	1,296

Extra Features

Extra Features				Legend
Code	Description	Size	Value	Bldg #
FPL	METAL PRE-FAB	1 UNITS	\$2,100	1
WAC	WALL A/C UNIT	1 UNITS	\$800	1

Land**Land Use**

Use Code	1010
Description	SINGLE FAMILY
Zone	RB
Neighborhood	50
Alt Land Appr Category	No

Land Line Valuation

Size (Acres)	0.12
Frontage	0
Depth	0
Assessed Value	\$211,700
Appraised Value	\$211,700

Outbuildings

Outbuildings						<u>Legend</u>
Code	Description	Sub Code	Sub Description	Size	Value	Bldg #
SHD1	SHED FRAME			80 S.F.	\$900	1
SHD1	SHED FRAME			40 S.F.	\$900	1

Valuation History

Appraisal			
Valuation Year	Improvements	Land	Total
2018	\$128,200	\$211,700	\$339,900
2017	\$128,200	\$211,700	\$339,900
2016	\$128,200	\$211,700	\$339,900

Assessment			
Valuation Year	Improvements	Land	Total
2018	\$128,200	\$211,700	\$339,900
2017	\$128,200	\$211,700	\$339,900
2016	\$128,200	\$211,700	\$339,900

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Stockton Services
PO Box 1306
Hampton, NH 03843-1306
603 929-7404

Brian and Cheryll Castle
6 Gentian Road
Hampton, NH 03842

Statement 09/17/2018

Locus: 6 Gentian Road, Hampton, NH

Elevation certificate \$ 600.00

Balance due \$ 600.00

Thank you.

Tocky

9/13/18 80° P cloudy
821 castle

↑ awb
φ RVB

10.17
A

now w/
CAP
5.57 ✓

MIGHT BE BENT
NOW
5.66 ✓

NO TOWN
ELEV

NO TOWN
ELEVATIONS

4.79
4.82

How

AA A @ φ

-4.84 = 5.33

5.53 00-00 101.35 +0.20 4.84 CAP IN CONC

5.70 339-42-35 82.72 +0.37 "

5.61 354-47-55 131.03 +0.28 "

8.50 47-55-10 43.13 +3.17 "

6.41 42-20-35 39.29 +1.08 "

6.49 38-58-10 51.05 +1.16 "

6.20 86-29-05 33.22 +0.87 "

4.50 178-04-20 106.29 -0.83 "

5.04 180-46-05 139.75 -0.29 "

4.30 177-30-35 154.53 -1.03 " CATCH BASIN

4.70 176-25-25 158.97 -0.63 " IPW/CAP
DISTRIBUTED

4.78 177-16-25 231.43 -0.55 " SPIKE
-0.54 (Floor)

NAHL

SMH

STOOP

PAD

GND ± CORRE

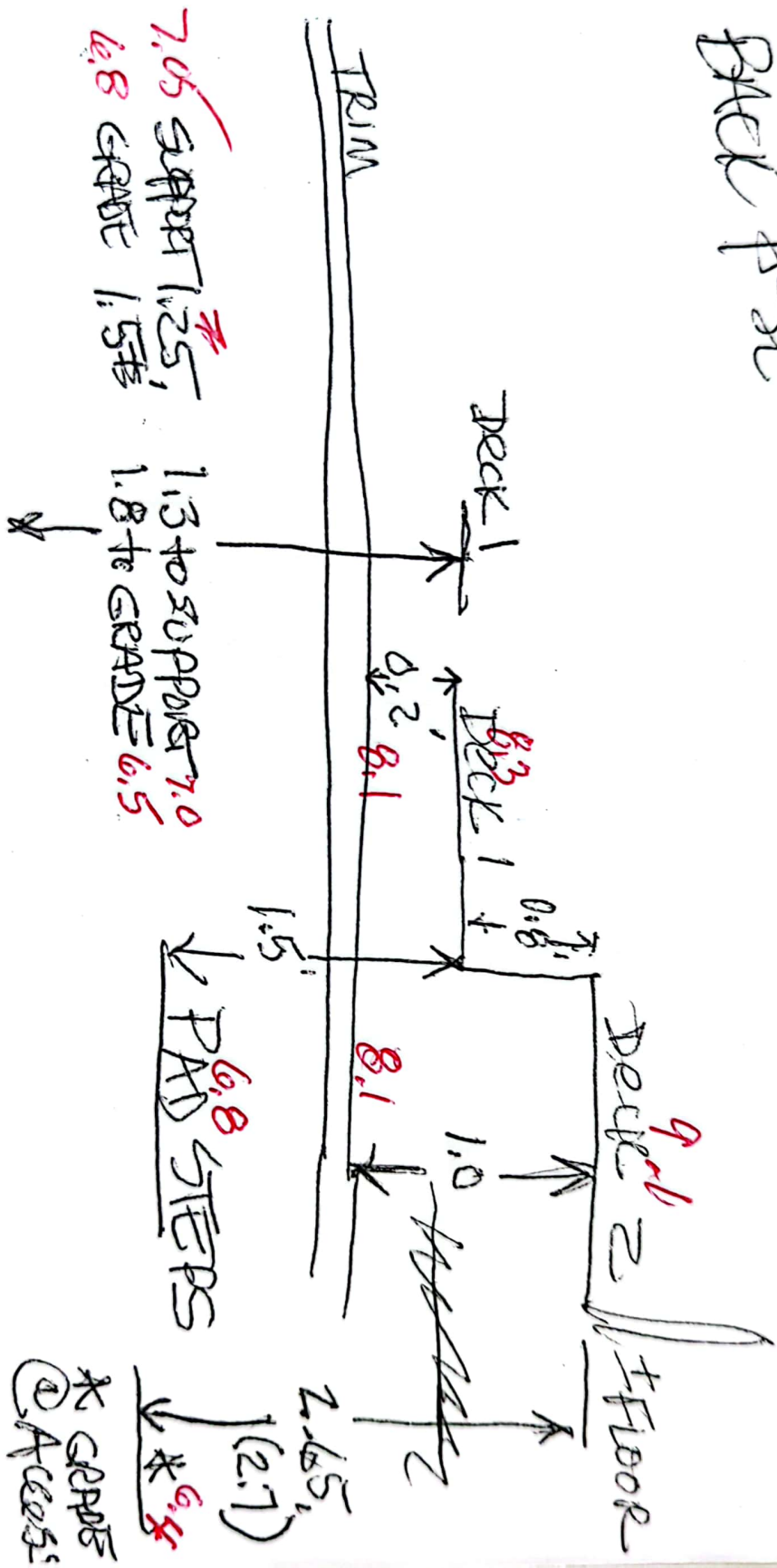
GND ± CORRE

CATCH BASIN
IPW/CAP

SMH

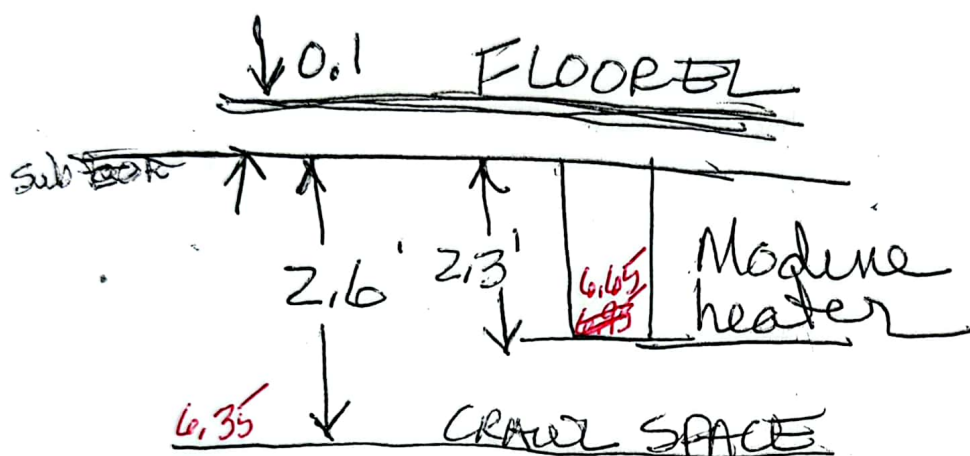
CATCH BASIN

Back FSE



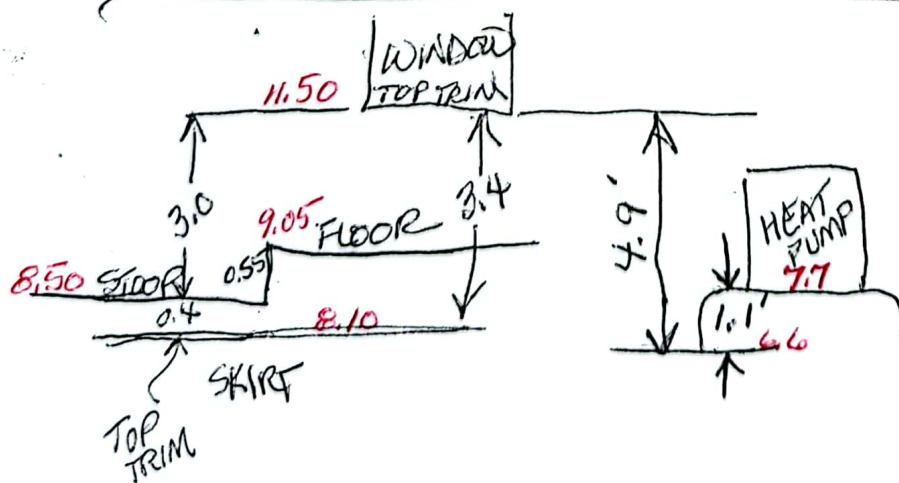
* GRAB @ Access

Modine heater
hanging from floor joists
0.3 above ground



FRONT STOOP 0.55 UP TO
FLOOR EL

STOOP DN 2.10 TO pad/steps 6.5



GRADE TO TOP TRIM
1.5
1.6
1.3
1.1 7.0
1.7
1.8 6.3
HAG
LAG

JOB
Bea
C

(NEW HAS
CAP)
IN CONC

#8

#6

#3

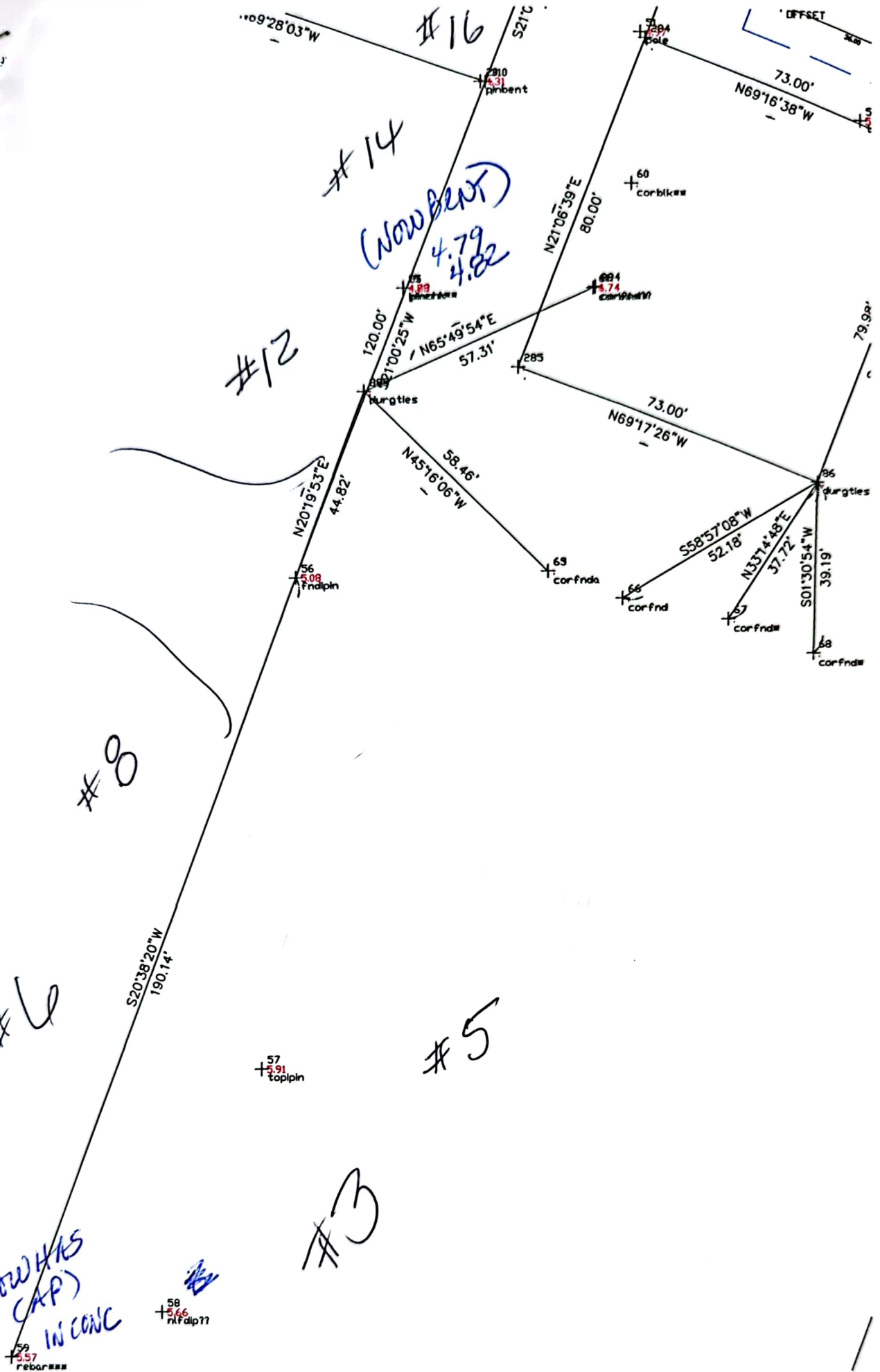
#5

#12

#14

#16

(NOV 2017)
4.79
4.82



JOB #17 519connaughton [5105]

Bearing Distance Elev Descip Pnt. Northing Easting Type
-----09-14-2018-----09:00:30-----C:\BENCHMARK\BHOME

Command= 210-

Point#, Start#-End# or G#= 1-5105

Bearing Distance Elev Descip Pnt. Northing Easting Type
-----09-14-2018-----09:00:40-----C:\BENCHMARK\BHOME

5.30	setpk	1	5367.5189	5148.4289	TRA
5.25	sethub	2	5401.4730	5060.4538	TRA
<u>Hold 4.78</u>	setspkep	3	5390.3398	4954.2558	TRA
6.72	offset	4	5108.6031	5073.9686	SS
6.55	ipinpsa	5	5061.9350	5056.0221	SS
7.90	dhpsa	6	4999.7113	4999.8872	SS
6.15	magnl**	7	5325.1811	5124.0603	SS
5.35	ipingrt	8	5511.4579	5196.9280	SS
5.59	ipingrt	9	5474.8555	5214.7824	SS
5.81	ipingrt	10	5424.4133	5195.4496	SS
5.83	ipingrt	11	5585.6344	5225.0137	SS
5.34	cortrim	12	5418.3335	5137.2953	SS
5.10	cortrim	13	5395.4868	5129.2360	SS
5.16	cortrim	14	5410.0481	5087.2122	SS
4.99	ctchbas	15	5396.8019	5156.3293	SS
5.48	pole	16	5418.6416	5159.4159	SS
5.43	corpad**	17	5376.9278	5113.5144	SS
4.31	spkoldip	18	5401.3148	4860.5161	SS
4.82	pinern**	19	5322.9047	4927.1471	SS

9/5 called
Cheryl Castle
Selling

500-600
living there
17 years ago

2 weeks

candbcastle
@ comcast...

Elevation cert

Ms. Anne Bialobrzewski

9/4/18

Cheryl
Castle

6 Gentian

1926-1928

603 235-2172

River St.

793-7204

Clement